

## **Podiatrist**

Podiatry services are those services provided by health professionals trained to diagnose and treat diseases and other disorders of the feet. A podiatrist performs surgical procedures and prescribes corrective devices, medications and physical therapy. Nevada Medicaid limits podiatric services to Qualified Medicare Beneficiary recipients and to Medicaid eligible children referred as the result of a Healthy Kids Screening.

#### **Covered services**

Podiatry services are covered for recipients referred as a result of a Healthy Kids Screening or individuals eligible as Qualified Medicare Beneficiaries (QMBs). Orthotics ordered as a result of a podiatric examination or a surgical procedure, is a Medicaid covered benefit and must be billed using the appropriate HCPCS code. Medicaid pays for the orthotic in addition to the office visit.

### Non-covered services

Medicaid does not provide coverage for preventive care including the cleaning and soaking of feet, the application of creams to insure skin tone and routine foot care. Routine foot care includes the trimming of nails, cutting or removal of corns and calluses in the absence of infection or inflammation.

# **Prior authorization requirements**

Prior authorization is not required for podiatric office visits provided for children as a direct result of a Healthy Kids Screening. Services provided to a QMB or QMB/MED recipient do not require prior authorization when Medicare is the primary payer.

#### **Notes**

Medicaid automatically pays the co-insurance and deductible up to Medicaid's maximum reimbursement after Medicare pays. If Medicare denies the claim, Medicaid will also deny payment.

Please refer to the Nevada Medicaid Services Manual Chapter 600 for additional information.